

PATENT **ATTORNEY DOCKET NO: 50005/005005** 

## COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a

patent is sought on the inv MODIFICATION OF NUCL	ention entitled METHODS EIC ACIDS, the specificat	AND COMPOSITIONS FO ion of which	R THE SELECTIVE
and was amend □ was described a	eto: anuary 12, 1998 as App ed on and claimed in PCT Interna and as amended	tional Application No.	
I hereby state that I have r	eviewed and understand the	ne contents of the above-ide	
I acknowledge the duty to Title 37, Code of Federal F	disclose all information I kr Regulations, §1.56(a).	low to be material to patent	ability in accordance with
application(s) for patent or least one country other that foreign application for pate least one country other that	rity benefits under Title 35, inventor's certificate or of an the United States of America or inventor's certificate on the United States of America on the United States of America application(s) of which provided the control of the provided in the United States of America application(s)	any PCT international application in the properties and have or any PCT international apprication in the sangerical filed by me on the sangerical filed by m	cation(s) designating at also identified below any plication(s) designating at
Country Serial Number Filing Date Priority Claimed?			
			Yes/No
			Yes/No
			Yes/No

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose all information I know to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56(a) which became available between the filing date of the prior application and the national or PCT international filing date of this application:

## COMBINED DECLARATION AND POWER OF ATTORNEY

Serial Number	Filing Date	Status
08/943,643	October 3, 1997	Pending

I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Paul T. Clark, Reg. No. 30,162, Karen L. Elbing, Reg. No. 35,238, Kristina Bieker-Brady, Reg. No. 39,109, and Evelyn D. Shen, Reg. No. 39,834.

Address all telephone calls to: Paul T. Clark at 617/420-0200.

Address all correspondence to: Paul T. Clark at Clark & Elbing LLP, 176 Federal Street, Boston, MA 02110.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

Full Name (First, Middle, Last)	Residence Address (City, State, Country)	Post Office Address (Street, City, State, Country)	Citizenship	
Edward I. Budowsky	Brookline, MA	80 Pleasant Street, Apt. 2 Brookline, MA 02146	Russia	
Signature: Date: 03/19/9 &				

Full Name (First, Middle, Last)	Residence Address (City, State, Country)	Post Office Address (Street, City, State, Country)	Citizenship
Samuel K. Aekerman	Weston, MA	175 Kings Grant Road Weston, MA 02193	U.S.A.
Signature:	1 K Ceels	2~	Date: 3/14/95

## COMBINED DECLARATION AND POWER OF ATTORNEY

Full Name (First, Middle, Last)	Residence Address (City, State, Country)	Post Office Address (Street, City, State, Country)	Citizenship
Andrei A. Purmal	Waltham, MA	58 Jacqueline Road, Apt. 11 Waltham, MA 02154	Russia
Signature:			Date: 03/19/9,

Full Name (First, Middle, Last)	Residence Address (City, State, Country)	Post Office Address (Street, City, State, Country)	Citizenship
Clark M. Edson	Somerville, MA	3 Durham Street, Apt. 2 Somerville, MA 02143	U.S.A.
Signature:	M. Ed.		Date: 3/14/48